Regional specialty advisers

Role description

Role and responsibilities
The Royal College of Physicians (RCP) regional specialty advisors (RSAs) are experienced consultant physicians who are nominated via their relevant specialist society or the RCP to serve their region in England, Wales or Northern Ireland. RSAs act as a source of local service advice particular to their specialty. This will normally be provided to the local (generic) regional adviser on issues relating to the approval of consultant job descriptions and the suitability of candidates for fellowship of the RCP.

Remit
We want to respect and work with the differing approaches taken by specialist societies hence the number of RSAs in each region varies widely and depends on the region, specialty and an assessment of the workload commitment. In some cases the RCP’s regional boundaries differ from those of the specialist societies who have their own particular structure. It may be the case that one RSA covers several RCP regions or a region is covered by more than one RSA although the former case is the more likely scenario.

In order to support RSAs in their duties the RCP have committed to provide administrative support to each region from a team of regional managers and administrators who will be the principle contact.

Qualification and tenure
Regional specialty advisors should be experienced consultant physicians who are in good standing and who have an awareness and commitment to equality and diversity legislation.

The tenure is typically a total of 4 years if nominated by the specialist society and 2 years if appointed by the RCP. The overall tenure, if appropriate, can be extended by agreement between the RCP and specialist society. If an RSA wishes to step down from the role before the end of their tenure they should inform the specialist society and the RCP immediately, and where possible, give 3 months’ notice to enable sufficient time to source a replacement.

If an RSA is not an RCP fellow they are still required to give input into the fellowship application process and their views will be considered as part of a wider review.

Nomination to be an RSA can be considered a recommendation for fellowship of the RCP. If an RSA is not a fellow of the RCP and would like to be considered they can contact the registrar of the RCP to take this forward.

Core RSA duties
Reviewing job descriptions for consultant, honorary consultant and specialty doctor posts
RSAs are asked to review job descriptions and job plans for substantive posts and comment on service matters relevant to the specialty, to inform the regional adviser, especially where the background of the regional adviser is in a different specialty. Regional advisers, with advice from the RSA, check that job descriptions fulfil the RCP recommendations and suggest further amendments or approve as necessary.

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1 References to ‘Trusts’ include NHS Authorities such as Health Boards (Wales) and Social Care Trusts (Northern Ireland) throughout this guidance.
Advice must be given within a particular timescale, usually one week, as the aim is to get overall comments back to the requesting Trust/Authority within three weeks.

**Reviewing applications for fellowship**

RSAs are required to review, assess and grade nominations for fellowship from consultants in their region and specialty adhering to the guidance and criteria as set out by the RCP.

RSAs should receive appropriate guidance documentation prior to commencing the core duties.

**Annual leave, cover and handover commitments**

Due to the requirement to respond to requests within a specific timeframe it would be helpful to notify the RCP ahead of any annual leave commitments. Conversely an RSA may be approached to cover a period of leave for a neighbouring region. Where there is a vacancy in a region an RSA’s remit may be extended upon agreement for up to 3 months to cover the gap in service until the vacancy is filled. Where an RSA is to demit their role it would be helpful if there was a handover process so the new RSA is supported by the demitting RSA in their role. This will be in addition to guidance provided by the RCP.

**Confidentiality**

It is required that all documents received for RCP review are treated as confidential by those individuals representing the RCP.

**Professional conduct**

RSA’s comments are often relayed back to the appointing trust for consideration thus when making comments, bearing in mind the views represent those of the RCP, it is expected these are formed in a professional and constructive manner.

**Duties of the specialist society**

- To provide the RCP with an updated list of local representatives
- The RCP expects that any nominations from the specialist society will be experienced consultant physicians who are in good standing.
- To specify an end of term date for all RSAs.
  - The tenure for RSAs nominated by the specialist society will be up to 4 years.
  - After 4 years the tenure can be extended on agreement.
- To inform and provide any potential representatives with a copy of the **RSA role description** provided by the RCP.
- To fill an RSA vacancy within 2 months from the date of notification in accordance with the **Process for filling a regional specialty adviser vacancy** document.
- For RCP appointed RSAs the specialist society will be invited to nominate their representative as a replacement after a period of 2 years.
- To inform the RCP of any changes as they occur.

**Duties of the RCP**

- To contact the specialist society, and where available, use their existing list of local representatives.
- To appoint an RSA with agreement of the registrar of the RCP if a vacancy is not filled by the specialist society in accordance with the **Process for filling a regional specialty adviser vacancy** document.
  - The tenure for RSAs appointed by the RCP will be 2 years.
- To inform the specialist society of any changes as they occur.
- On appointment, to contact the RSA with an induction pack incorporating guidance and supporting documents on the role.

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